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COVER LETTER

	tration Section of Cor					
SUBJECT:	Lime Ener	rgy Services Co.				
SUBJECT.		Name	of corporatio	n - must	include suffix	
Dear Sir or M	adam:					
"Certificate of	f Existence		te of Good Sta	nding"	and check are sub	ct Business in Florida," omitted to register the
Please return	all corresp	ondence concer	ning this matte	r to the	following:	
Mary Colleen.	Brennan					
			Name of	Person		
Lime Energy S	Services Co.	ı				
			Firm/Cor	npany	***************************************	
3 Convery Blv	d., Suite 60	0				
		· · · · · · · · · · · · · · · · · · ·	Addı	ress		
Woodbridge, N	NJ 07095		,			•
			City/State	and Zip	code	
aberg@lime-en	nergy.com					
		E-mail addres	ss: (to be used	for futu	re annual report r	notification)
For further in	formation	concerning this	matter, please	call:		
Anne Berg			at (354	-4657	
Nam	e of Persor		Area Co	de	Daytime Telep	hone Number
Regis Divisi Clifto 2661 Tallal	tration Section of Corporation Building Executive nassee, FL	porations 3 Center Circle			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
■ \$70.00 Fil		\$78.75 Filin Certificate	ng Fee & (75 Filing Fee & fied Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES; THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Lime Energy Se	ervices Co.			
	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORAT	ion,"	
(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transac	cting business in Florida)	
Massachusetts	3	04-3095032		
(State or countr	ry under the law of which it is incorporated)	(FEI number, if applicable)		
10/10/89				
(Date	of incorporation)	(Date of duration, if other than perpetual)		
9/18/2015				
3 Convery Blvd	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1 Suite 600, Woodbridge, NJ 07095	in Florida, if prior to registration) 1502, F.S., to determine penalty lia	bility)	
, <u></u>	***	ipal office address)		
	(Current mail	ing address, if different)		
S. Name and stree	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)		
Name:	C T Corporation System		SEE AN OU	
Office Address:	1200 South Pine Island Road		D 12:	
	Plantation	, Florida	ATE RID/	
	(City)	(Zip code)	, 	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

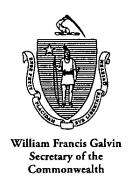
C T Corporation System

By: What amely Asistant Pacetacy
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Adam Procell Director: 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 Address: Mary Colleen Brennan Director: 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 Address: **B. OFFICERS** Adam Procell President: 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 Address: Chief Financial Officer: Mary C. Brennan 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 Mary Colleen Brennan Secretary: 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 Address: Mary Colleen Brennan Treasurer: 3 Convery Blvd., Suite 600, Woodbridge, NJ 07095 NOTE: If pecessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 13. Mary Colleen Brennan CFO & Treasurer

(Typed or printed name and capacity of person signing application)



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: October 23, 2015

To Whom It May Concern:

I hereby certify that according to the records of this office,

LIME ENERGY SERVICES CO.

is a domestic corporation organized on October 10, 1989 , under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

Secretary of the Commonwealth

William Travino Galecin

Certificate Number: 15105935320

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: hma

"Attached is a copy of the Good Standing certificate for LIME ENERGY SERVICES CO. with certificate number 15105935320 that you ordered. If you ordered multiple certificates, they will be processed and sent separately.

This electronic certificate can be verified on-line by entering the certificate number at http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx."